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ABSTRACT

A wide variety of counseling techniques based on behavioral principles have been described. While the therapeutic advantages of these techniques have been demonstrated, there is limited evidence to suggest that systematic procedures have been developed to train people to use these techniques. The proposed discrimination model is based on individualized training procedures that include: operationally defined objectives; a variety of learning activities; criterion-referenced evaluation; established levels of performance; opportunity for remediation; and self-pacing. Discrimination learning involves training the prospective counselor to differentiate behaviors in three areas. The first includes self development or the ability of the trainee to discriminate the potential effects of his facilitating or interfering behaviors on client behavior. The second area involves developing and expanding trainee's response repertoire of skills, techniques, or counseling strategies. The third area focuses on developing the trainee's ability to discriminate the consequences of his behavior on client behavior. Elaborate training procedures for each area are proposed. Implications for training validity and accountability are discussed. Methodological suggestions for research on training behavioral counselors are presented. (Author)

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DISCRIMINATION MODEL FOR SYSTEMATIC CC NSELOR TRAINING

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ABSTRACT

DISCRIMINATION MODEL FOR SYSTEMATIC COUNSELOR TRAINING

A wide variety of counseling techniques based on behavioral principles have been described. While the therapeutic advantages of these techniques have been demonstrated, there is limited evidence to suggest that systematic procedures have been developed to train people to use these techniques. The proposed discrimination model is based on individualized training procedures that include: operationally defined objectives; a variety of learning activities; criterion-referenced evaluation; established levels of performance; opportunity for remediation; and self-pacing. Discrimination learning involves training the prospective counselor to differentiate behaviors in three areas. The first includes self development or the ability of the trainee to discriminate the potential effects of his facilitating or interfering behaviors on client behavior. The second area involves developing and expanding the trainee's response repertoire of skills, techniques, or counseling strategies. The third area focuses on developing the trainee's ability to discriminate the consequences of his behavior on client behavior. Elaborate training procedures for each area are proposed. Implications for training validity and accountability are discussed. Methodological suggestions for research on training behavioral counselors are presented.

DISCRIMINATION MODEL FOR SYSTEMATIC COUNSELOR TRAINING[2]

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INTRODUCTION

Interest in the application of behavioral principles to counseling and/or psychotherapy is burgeoning. Within the last decade, a number of volumes have been written describing a variety of techniques that can be applied in the process of counseling to facilitate therapeutic change (Ullman and Krasner, 1965; Wolpe and Lazarus, 1966; Ayllon and Azrin, 1968; Bandura, 1969; Franks, 1969; Krumboltz and Thoresen, 1969; Wolpe, 1969; Kanfer and Phillips, 1970; Lazarus, 1971; Thoresen and Mahoney, in press). However, there is limited evidence in the literature to suggest that the advocates of behavioral counseling have developed comprehensive procedures for counselor training which are derived from neo-behavioristic methodology and based on modern principles of learning. The purpose of this monograph is to present a systematic model for counselor training based upon demonstration of specific skills at established levels of performance. The proposed model assumes that the counselor must be able to facilitate change in social systems as well as in individual and group situations. The objectives of the training procedures of this model are for the counselor trainee to make discriminations.

Discrimination

Discrimination is defined as differential responding in the presence of different situations. The process involves the ability to distinguish or to tell apart two or more behaviors, concepts, events, objects, and people. For example, a person is a good discriminator if he can differentiate between the fragrance of a sauterne from a rosé wine, the musical compositions of Schumann from Schubert, or the paintings of Manet from Monet.

The objectives of the proposed model attempt to train counselors to make three types of discriminations. First, to identify self behaviors that could potentially facilitate or interfere with the relationship with the client. The second type of discrimination involves the identification of individual client goals and the counselor's determination and selection of appropriate counseling responses and strategies. The last type of discrimination requires the counselor to assess the effects of the selected responses and strategies in terms of resulting client consequences. This model of discrimination training is based upon a functional relationship between the counselor's behavior and subsequent client behavior rather than standardized modes of responding and/or pre-determined counselor theoretical biases.

In this model, counseling is viewed as a process consisting of many ongoing counselor discriminations that are more detailed and elaborate than the generalized concept of discrimination as presented by others. For example, Carkhuff (1971) defines discrimination as learning to understand the different levels of facilitative conditions "by setting up a mid-point, which, if people reach it, means that they are doing enough to help" (p. 172). There are two basic differences between Carkhuff's definition of discrimination and the way in which discrimination is used as a basis for this training model. First, counselor behavior in Carkhuff's model is based upon pre-determined theoretical notions. For example, the counselor is instructed to respond to the client with "responsive conditions" during the early stages of helping and with "initiative conditions" during the later phases of help-

ing (1971, p. 170). In contrast, the model proposed in this paper emphasizes that counselor behavior cannot occur in an a priori, standardized manner if it is to be functionally related to resulting client behavior. Although Carkhuff describes this process as discrimination, it is, in fact, probably more like generalization, since the counselor is encouraged to respond in similar ways to different clients who present different problems and identify varied goals.

Secondly, counselor behavior in Carkhuff's training is based upon three counselor-determined goals of helping which, according to Carkhuff, are to get the helpee to explore his problem, to get the helpee to understand himself, and to get the helpee to act upon his understanding (1971, pp. 168-169). These objectives do not require the counselor to make discriminations about the client's goals since they are pre-determined. Because of this the counselor responses may be only incidentally facilitative (reinforcing) to the client since they may or may not be related to each individual client's determined goals. The model in this paper assumes that the counselor must make discriminations about whether or not his behavior is related to client's goals which are different for each client. The counseling relationship can be described as a reciprocal one in which the client is reinforced for reaching his goals while the counselor is rewarded for his potential effectiveness. For the counselor to be able to make these kinds of discriminations, a personalized system of training is required.

Training

Although some have stated that the role of the counselor is to "verify discriminations" (Hosford and Zimmer, 1972, p. 8), no comprehensive procedures in this kind of discrimination training have been reported in the literature. After Keller's (1968) elaboration of a "personalized system of instruction" for university level students, a number of university persons have implemented courses that are variations of the Keller plan (Ferster, 1968; McMichael and Corey, 1969; Lloyd and Knutzen, 1969; Sheppard and MacDermot, 1970; Myers, 1970; Born and Herbert, 1971; Johnston and

Pennybacker, 1971; Born, Gledhill, and Davis, 1972). Several characteristics, shared by all of the above studies, form the basis of the training procedures of this model. The first characteristic is the specification of learning outcomes or objectives. This is referred to in the following procedures as the operational definitions of what is to be learned. Operational definitions permit the trainee to differentiate the cues associated with a given behavior. Specifying the learning outcomes suggests to the trainee what he should be able to do as a result of experiencing the learning activity. The second aspect of training involves delineations of learning activities (training steps) designed to achieve the stated objectives. A variety of activities have been recommended in the training procedures of this model based on empirical demonstration of effectiveness. For example, these include programmed learning (DiMattia and Zimmer, 1972), modeling procedures (Bandura, 1969), video simulation (Eisenberg and Delaney, 1970), and video interview feedback (Ivey, 1971). The third aspect is criterion-referenced evaluation (as opposed to norm-referenced). Criterion-referenced evaluation means that levels of performance are established for each step of the training procedures based upon mastery of the specified performance instead of relative ranking of individuals (norm-referenced evaluation). The criterion levels specified in this paper range from 75% to 90%. These may be arbitrary levels but they insure at least a minimal level of performance without which the training program would have no validity. If a trainee has not achieved the criterion level for a specific objective, then opportunities for remediation are provided, which is the fourth characteristic of a personalized system of training. For example, in the proposed training procedures, if the trainee does not reach criterion level upon completion of the sequence, recycling through selected learning experiences is recommended. The last characteristic, and perhaps the most obvious, is that the model allows each trainee to proceed through the training at his own rate. The above five characteristics are incorporated into the procedures of the proposed model which has three components

for counselor discrimination training: self development, response repertoire development, and process development. Table 1 shows the elements for each of the three components and the labeled and popularized caption for each element.

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Insert Table 1 about here

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METHOD

Self Development

Self development is proposed as the first component of training because the counselor trainee must be able to identify (and possibly modify) his behaviors that could facilitate or interfere[3] with the process and outcome of counseling (Ivey, 1971). Unless the trainee can identify these behaviors, his ability to develop a repertoire of counseling skills and to discriminate the effects of his behaviors will be limited. Counselor behaviors can be considered covert (thoughts, feelings, fantasies, physiological states) or overt (verbal, nonverbal). For example, a young counselor trainee may anticipate anxiety in talking with older clients. The anxiety may be reflected during the interview in ruminating thoughts (covert), changes in physiological states (sweat, breathing rate, heartbeat rate, or stomach contractions), or may be manifested in overt behavior such as frequent gestures, fluctuations in the tone of voice (nonverbal), or the reluctance to emit confrontation responses (verbal) with this kind of client. The counselor must be able to discriminate the potential effects of his facilitating or interfering behaviors on the behavior of the client. A counselor trainee may be unaware of his behaviors that facilitate interaction with others. For instance, a counselor trainee confronted with a client may report surprise after the interview that the client so readily disclosed his problem and discussed his goals. The trainee may not be aware of the possible re-

inforcing effects that his direct eye contact and facial expressions had on the client's behavior. Also, recognition of a potentially interfering self behavior may permit the counselor to focus his attention on the client. For example, a client expresses intense feelings of guilt about being employed and leaving pre-school aged children at home. The counselor might also experience guilt feelings because of similar circumstances. This may be reflected in her interview behavior by avoiding pursual of client problem-related topics. Mere recognition of self behaviors may not always be sufficient and techniques for modifying these behavior(s) may have to be applied. In this instance, self regulation strategies can strengthen the facilitating behaviors or can inhibit the interfering ones. However, if this is ineffective, remediation procedures as described in the following section may have to be used. Other facilitating and interfering behaviors may be discovered as a consequence of repertoire and process development. Therefore, self development continues in the next two components of training.

Training Procedures for Self Development

The self development component has three elements: a) identification of counselor overt - covert behavior, b) cue modification and self regulation, and c) remediation procedures. Table 2 shows the training procedures, criteria levels, and materials associated with each part of self development. The first element (A) in-

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Insert Table 2 about here

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volves presentation of definitions and models of various overt and covert behavioral cues so that the counselor trainee can discriminate both his facilitating and interfering behaviors (1 and 2 for A under training procedures in Table 2). This is accomplished through direct instruction, and observing and recording the behaviors of a videotaped model. The trainee uses a rating chart, as illustrated in Figure 1, to record these behaviors. Also, any number of focused awareness experiences such

as meditation, systematic relaxation, and biofeedback procedures can be used for the third step of training. These procedures are designed to place the trainee

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Insert Figure 1 about here

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in a situation in which his behaviors are heightened and thus more easily identified. After the trainee can identify his self behaviors, learning experiences are provided so that he can recognize the potential effects of his behaviors on others. Consequently, as shown in steps 4-6 of Table 2, the trainee conducts a videotaped role-play interaction, observes the tape, records the overt and covert behaviors (Figure 2), labels facilitating and interfering behaviors, and compares his identifications with the role-play partner and a process observer. The trainee must be able to determine which of his overt and covert behaviors were facilitating (i.e., those behaviors that contributed to the client's talking about himself, his problems, and his goals) and which ones were interfering in the dyadic interaction (i.e., those behaviors that contributed to his preoccupation with self and prevented full attention to the client [Figure 2]). Comparison of responses with the role-play

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Insert Figure 2 about here

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partner and the process observer (step 6) provides an additional opportunity for extensive feedback about the trainee's self behaviors. Without this kind of feedback, a trainee may not be able to discriminate initially the effects of his behaviors on others which would limit his acquisition of skills in the latter two stages of training in repertoire and process development. In step 6, the trainee must reach 90% agreement with the partner and process observer in recognition of facilitating and interfering behaviors (Figure 2) before proceeding to the next element of cue modification, listed as B in Table 2.

While there are many ways to modify facilitating and interfering counselor behaviors, self-regulation procedures are recommended because they require the trainee, rather than the supervisor, to initiate the self-controlling responses as well as the responses to be controlled. An additional advantage is that new behavior is more apt to be maintained when the individual perceives that he is responsible for the behavior change (Cautela, 1969; Secord and Backman, 1964). Self-observation and self-monitoring precede initiation of self-regulation strategies, since "adequate self-control is encountered to a greater extent in individuals who have had better training in self-observation and self-monitoring" (Kanfer, 1970, p. 214). In steps 1-2 of cue modification (B, Table 2), the trainee completes several videotaped role-play interactions. This permits self-observation in which the trainee views the tapes and records his behaviors on a rating chart (Figure 3). In step 3, self-monitoring is instituted when the trainee charts the frequency and duration of each behavior and records the antecedent and consequent condition of the behavior on a rating chart (Figure 4). A frequency count of a behavior can be easily obtained with use of a hand counter to tally the number of times a given behavior occurs.

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Insert Figures 3 and 4 about here

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Duration of a behavior can be accounted for by using a stopwatch or timer which can be re-set to zero after the behavior stops. Self-observing and monitoring of behaviors within and outside of the videotaped interactions provide baseline data that suggest which behaviors should be subjected to self-regulation strategies. While self-monitoring and charting of behaviors are sometimes sufficient to modify facilitating and interfering responses, at other times more complete self-regulatory strategies must be applied. As illustrated in step 4 (B, Table 2), the three primary procedures include changing the stimulus condition under which the undesired behavior usually occurs (4a), interrupting the chain of behaviors which leads to emission of

the undesired response (4b), and (step 4c) making a high probability behavior contingent upon a low probability behavior (Cautela, 1969). Recent research supports the efficacy of all three procedures, particularly when the first two methods are used to weaken or inhibit an interfering response and the last one to strengthen a facilitating behavior (Ferster et al., 1962; Goldiamond, 1965; Homme, 1965; Kanfer and Duerfeldt, 1968; Hannum, 1972; Mahoney, 1972). For example, suppose a trainee wishes to decrease the number of distracting gestures he makes in the interview. Self-observing and monitoring of the behavior suggest that distracting gestures consistently follow the stimulus condition of lengthy and repetitive counselor responses. Changing the stimulus condition; i.e., reducing the length of each counselor response, would inhibit distracting gestures. Perhaps another trainee wishes to reduce the number of initiating responses he makes in the interview. Self-observing and monitoring by the trainee indicate a consistent pattern or behavioral chain of a client stimulus, counselor response one followed by counselor response two whenever a subsequent client stimulus does not occur. In later interviews, whenever the counselor response is not immediately followed by a client verbalization, the counselor can inhibit the frequency of initiating responses through interruption of the chain by counting to ten. Frequently, a counselor wants to increase a behavior that is not readily accessible in his repertoire. Beginning counselors often report covert behaviors of negative self thoughts, such as "I worry about making a mistake" or "I worry about being a failure". Increasing positive self thoughts can strengthen the counselor's self confidence covert behavior and can directly effect overt behavior (Hannum, 1972). Since a positive self thought such as "I can be a successful counselor" is a facilitating response to be strengthened, its probability can be increased by making a high probability behavior (i.e., one that already occurs frequently in the counselor's repertoire) contingent upon completion of a low probability behavior. In this instance, each counselor trainee identifies a high probability (frequent occurring) behavior, for example, cigarette smoking, drinking

a beverage, driving, reading, etc. The facilitating behavior to be strengthened such as "I can be a successful counselor" can be either imagined or written down on a small note card, kept in a pocket, or taped on the wrist. Before the trainee can engage in the high probability behavior he must first complete the low probability one. In other words, before a trainee can drink a beverage, for example, he must first read, write or think about "I can be a successful counselor" over a period of time. The high probability behavior can be overt or covert, serves as a self administered reinforcer, and thus increases the probability of the counselor's thoughts of success (Marston, 1965; Bandura, 1969; Mahoney, 1972).

After self-regulation strategies have been administered, the trainee moves to steps 5-7 (B, Table 2) and completes additional videotaped role-play interactions (step 5), records facilitating and interfering behaviors, and monitors their frequency and duration (step 6). The recording is compared to initial baseline observations in order to evaluate the self-regulation procedure (step 7). If the interfering behavior(s) has decreased at least 75% and if the facilitating behavior has increased at least 75%, then the cue modification element of the self development component has been completed. If criterion levels are not met, the trainee proceeds through one or more remediation steps specifically designed to further strengthen the facilitating behavior or inhibit the interfering behavior as presented in remediation procedures (c) of Table 2. These might include: reactive inhibition (Malleson, 1959), desensitization (Lang and Paul, 1969), covert sensitization (Cautela, 1967), thought-stopping (Delaney and Eisenberg, 1972), reinforcement techniques (Skinner, 1953), bull-baiting (Piaget, 1972), negative practice (Ullmann and Krasner, 1965), role reversal/behavioral rehearsal (Hackney and Nye, 1973), and social modeling (Bandura, 1969). Completion of remediation procedures should enable the trainee to re-cycle through self-regulation steps (B, Table 2) in a successful manner. Successful completion of the self development component

increases the trainee's chances of acquiring skills required in the next training component, repertoire development.

Repertoire Development

The purpose of the second component of training involves developing and expanding the response repertoire of the counselor trainee. A larger repertoire will increase the trainee's potential effectiveness with a variety of clients by providing multiple responses and strategies from which to select. Because of different social learning histories, each trainee has a unique "interacting style" that may be defined as a collection of verbal and nonverbal responses for behaving in a social situation. Some trainees possess an interacting style that generalizes across all social situations, including the counseling setting. Many of these generalized responses may be facilitative but others may be inappropriate for the counseling process (i.e., frequent self-referent responses, frequent counselor-initiated topic changes, frequent eye contact breaks). Because each trainee is limited by his past learning history, repertoire development provides an opportunity to eliminate inappropriate behaviors, to add alternative responses, and to develop existing responses. The behaviors to be eliminated, acquired, and strengthened in repertoire development will be different for each trainee.

Repertoire development, as conceptualized in this paper, is based upon certain assumptions about the role and function of the counselor. The role of the counselor is to facilitate change with a variety of clients and settings. The functions of the counselor may include one or more of the following: (1) The counselor is able to help clients reach their goals in both individual and group interactions. (2) Sometimes the client's problem may be a result of the environment in which he lives. In such cases, (a) the counselor may have to teach the client ways to change his own environment; (b) the counselor may need to consult with those people in the environment who control the contingencies of the client (i.e., parents, teachers,

etc.); (c) finally, the counselor himself must be equipped to manipulate the power structure of the social setting(s) in which the client(s) exists. (3) The last function of the counselor may be described as the gathering and giving of information to the kinds of individuals as described in 2 above.

In order to carry out the above functions, the specific skills included in counselor repertoire development are: 1) to discriminate between different nonverbal and verbal client behaviors; 2) to develop a collection of individual verbal and nonverbal counselor responses; 3) to employ different counseling strategies that may be used within or outside of the counseling interview; 4) to develop a repertoire of environmental intervention techniques such as self control, contingency management, and "in vivo" desensitization.

Training Procedures for Repertoire Development

The training procedures for the four elements (A-D) of repertoire development are described in Table 3. The purpose of the first element (A) is to obtain a behavior baseline for each trainee so that he can identify individual objectives to

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Insert Table 3 about here

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be attained as a result of completing B & C of the repertoire component. The trainee completes several videotaped interactions with different coached clients (step 1), observes the tapes, records the behaviors, checks for 90% accuracy with an observer (step 2), and (step 3) monitors the frequency and duration of each behavior on a chart (Figure 5). In steps 4 and 5, the trainee compares this baseline data for each interaction, identifies behaviors to strengthen (4a), behaviors to weaken (4b), behaviors to acquire (4c), and selects behaviors to add to his repertoire (5a) with (5b) corresponding criterion levels (Figure 6). In doing so, the trainee may recognize additional potentially facilitating or interfering behaviors about himself that were not apparent during the self development component.

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Insert Figures 5 and 6 about here

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The trainee then proceeds to the second element (B) of the component: response repertoire development for client and counselor behavior. The first part of this element (B) consists of increasing the counselor trainee's ability to make discriminations of various client verbal and nonverbal behaviors. The first step involves presentation and 90% accurate identification of operationally defined client behaviors (i.e., discrimination between cognitive and affective verbal components and nonverbal cues associated with emotions). In step 2, these behaviors are described by a programmed module in which the trainee must accurately complete 90% of the frames. Teaching discriminations of client emotions via a programmed module has been verified empirically by DiMattia and Zimmer (1972). Following this (step 3), the trainee observes a video simulation tape (Eisenberg and Delaney, 1970) of different client stimuli, labels and records client verbal and nonverbal behaviors on a rating chart (Figure 7), and checks for 90% accuracy with the answers provided on the video simulation tape.

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Insert Figure 7 about here

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The second part of this element (B) consists of a nine step training procedure designed to increase the trainee's repertoire of verbal and nonverbal counselor behaviors (see Table 3). The purpose of this training process is to focus on the specification and reinforcement of "appropriate" behavior (i.e., strengthening appropriate behavior that exist in the trainee's repertoire); or adding new "appropriate" (facilitative) behaviors to the trainee's repertoire. If a trainee demonstrates inappropriate (potentially inhibiting) behavior, procedures as described in

the self development component are recommended. A great deal of attention to inappropriate behaviors may not be as successful as reinforcing incompatible behaviors (appropriate) and ignoring the inappropriate behaviors. In other words, to focus on "inappropriate" counseling behaviors may encourage (reinforce) a trainee to attend to these undesired behaviors.

The nine steps for developing counselor behaviors in the second element of (B) are described as follows. In step 1, the trainee is required to give 90% accurate identification of the operational definitions provided for each counselor response class. Then, the trainee selects the programmed module for each behavior he desires to include in his repertoire and successfully completes 90% of the frames in step 2. Next (step 3), the trainee observes a model of the given counselor response; then makes his own responses to client stimuli presented on a simulation tape (step 4). If he achieves 90% agreement with the modeled answers (step 4), he then completes a videotaped role-play interaction using the selected response class (step 5). If he demonstrates 80% accuracy in use of the response class (step 6) as charted on Figure 8, a second videotaped interaction with a coached client is completed (step 7). Otherwise, the trainee is re-cycled through steps 5-6. This interaction serves as a means for using a self modeling procedure (step 8) in which inappropriate (inhibiting) responses are erased so that the trainee views only his demonstrated appropriate behaviors. The final step (9) in the training procedure involves the trainee's teaching the response to someone else. The same nine training steps in counselor be-

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Insert Figure 8 about here

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havior development (B) are also recommended for developing counseling strategies (element C, Table 3) such as: reactive inhibition, systematic desensitization, covert sensitization, thought-stopping, reinforcement techniques, bull-baiting, negative practice, role reversal, behavior rehearsal, modeling, contracting, self-moni-

toring, and assertive training. A criteria rating chart, as illustrated in Figure 9, can be designed for the particular strategy the trainee wants to develop. The be-

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Insert Figure 9 about here

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haviors and strategies acquired in elements B and C (Table 3) are applicable in both individual and group settings.

The purpose of element D in Table 3 is to provide training experiences in contingency management that enable the counselor trainee to implement intervention techniques in the environment. The training procedures suggested include the use of operational definitions, programmed modules, modeling tapes (steps 1-4, B, Table 3, under Counselor Behaviors), and successful completion of appropriately designed simulation and field experiences.

Process Development

Repertoire development, the process of discriminating different client behaviors and expanding counselor alternative responses to those behaviors, must be successfully completed prior to the third and most important component of training, process development. Process development includes making discriminations about the selection of counselor responses and determining the consequences of these responses on client behavior. Selecting the responses and determining the consequences should be neither an independent behavioral unit nor should it be a reflection of theoretical biases of the counselor. Training in process development increases the probability that the trainee will make discriminations based on a continuous functional analysis between the stated problems and objectives of the client and their consequences rather than upon a number of isolated behavioral events. Therefore, the counselor must be able to identify client problems and to assist the client in defining counseling goals and objectives (Bandura, 1969). Since the initial goals of the client may change, the counselor's discriminations should continually reflect the current

status of the client's goals and expectations. This kind of client-counselor relationship involves social reciprocity in which each member of the counseling dyad is reinforced. That is, when the consequences of counselor responses are client goal-related, reinforcement is provided to the client through attaining his goals and to the counselor by confirming that his responses are "on target". When this is the case, the counseling relationship can be described as reciprocal rather than unilateral and the probability of therapeutic change is increased. Process development has been the most neglected aspect of counselor training and yet it is the most important discrimination a counselor must make. This kind of training provides the opportunity for validating counseling outcomes that are based upon client goal-related consequences rather than pre-determined standards of counseling effectiveness.

Training Procedures for Process Development

There are four elements (A, B, C, D) in the training procedures proposed in process development as illustrated in Table 4. Following completion of the first element (A, steps 1-5, Table 4), the counselor trainee will be able to engage in pro-

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Insert Table 4 about here

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blem identification and goal setting with a variety of clients, for example, individual students, teachers, parents. This is accomplished through completion of a programmed module (step 1), observation of video models (step 2), accurate problem identification and goal setting with clients in simulated settings (step 3 and 4), and successful problem and goal identification with different clients in videotaped interactions (step 5). Criterion level for these interactions is assessed through a rating chart as illustrated in Figure 10.

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Insert Figure 10 about here

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The second element of process development (B, steps 1-7, Table 4), requires the trainee to make discriminations about selection of responses and their effects in terms of client consequences. In this element of process development (B), the counselor trainee first observes a counselor-client model in which the client behavior, counselor response, and resulting consequence is labeled (step 1). In step 2, the trainee observes a second interaction and identifies and records the client behavior, counselor response, and resulting consequence (Figure 11). After the 90% labeling criterion level is achieved, the trainee observes a third interaction of client behavior and counselor response and must accurately predict 75% of the actual resulting consequences (step 3). The next stage of training (step 4) involves a videotaped role-play interaction in which the counselor selects a response and identifies the consequences for each client stimulus. The counselor's response and consequence identification is compared with an observer or role-play partner to determine if the criterion level of 75% agreement is reached (step 5). The same process occurs in a videotaped interaction with a real client in steps 6 and 7.

The next element of process development, counselor-client reciprocity (C, steps 1-4, Table 4), involves the determination of whether or not the identified consequences are client goal-related and, consequently, the degree to which the counseling relationship is mutually reinforcing (i.e., reciprocal). This element (C) requires the trainee to observe a counselor-client model in which the counselor responses and consequences are clearly related to client goals (step 1). In step 2, the trainee must practice the modeled behavior in a simulation tape of client stimuli by selecting a response, identifying the consequence, and determining if the consequence is reinforcing and client goal-related (Figure 11). If there is 75% agreement between his discriminations and those of an observer, the trainee completes the same process of selecting a response, identifying the consequence, and determining if it is reinforcing and goal-related with actual clients (steps 3 and 4).

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Insert Figure 11 about here

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The last element, environmental intervention (D, steps 1-4, Table 4), requires the trainee to identify and to evaluate the consequences of his strategies utilized for goal attainment in an environmental or social system setting.

DISCUSSION

A great deal of the counseling literature reports strategies and techniques that counselors can use to help clients solve problems (Benjamin, 1969; Brammer and Shostrum, 1960; Delaney and Eisenberg, 1972; Krumboltz and Thoresen, 1969; Patterson, 1966). However, there are only a few references to suggest that these same techniques can or should be used to assist the counselor (trainee) in developing himself for the process of counseling. One of the unique features of the training model proposed in this paper starts with self development which assumes that the effects the counselor has on others may be therapeutically limited unless he acquires some discriminative abilities about his own behaviors (covert and overt).

Like self development, the second stage of the model, repertoire development, can also increase the trainee's self confidence by exposing him to a variety of skills and techniques from which he can select in order to facilitate client and organizational change. Any number of skills and strategies can be included in repertoire development so that the trainee can be equipped with a cross section of techniques typically labeled according to their respective theory, such as client-centered, existential, gestalt, rational-emotive, Adlerian, and behavioral counseling. As Carkhuff has recently stated, an individual's discriminations are a function of the quanity and quality of skills in his response repertoire (1972). Although development of a response repertoire in skills and techniques can add to styles of interaction and thereby increase "degrees of freedom" in making discriminations (Carkhuff, 1972,

p. 241), two precautions should be considered so that training is not concluded after development of a response repertoire. First, the techniques included should be operationally defined with specified criterion levels so that the trainee can evaluate when he is executing each strategy properly. Secondly, decisions about the effectiveness of these techniques should be delayed until process development so that the trainee has the opportunity to assess the effects of the techniques upon actual clients.

Previous models of counselor training have emphasized development of counselor responses, skills, and techniques. However, counselor trainees have learned these skills on an a priori basis. Process development, the third component of the training model proposed in this paper, is viewed as the most crucial phase of training since the trainee's effectiveness is judged in terms of a functional relationship of his behavior on the client's behavior (consequences). These consequences should be evaluated for each setting or individual and for their unique problems and goals. The validity of the training is established when the counselor trainee can demonstrate that he can facilitate changes in behavior for an individual, group, or social setting.

Most counselor training procedures operate as if all trainees begin at the same stage of development and learn at the same rate. The model proposed in this paper emphasizes the different social interaction history, "interacting style", and response repertoire possessed by each trainee. The validity of the individualized approach to training is enhanced because the individual's learning deficiencies are based on his own behaviors rather than the assumed behaviors of other individuals.

The discrimination model proposed in this paper suggests the methodology that should be used in research. There are currently two paradigms used in understanding human behavior. The idiographic method examines an individual's behavior under different environmental conditions. Idiographic paradigms are sometimes referred to as within subject, intra-subject or single subject designs (Cormier and Huck, 1972).

The other method or nomothetic paradigm examines groups of subjects and relies on inferential statistical procedures to test hypotheses. These are called between group, comparative group, or inter-subject comparison designs (Cormier and Huck, 1972). Often these two methods create conflicting points of view with respect to research. Both the idiographic and nomothetic approaches can be used in a complementary way for research. For example, the research in counselor training cited by Carkhuff (1971) and by Ivey (1972) refers to between group and factor analytic studies that have reported identification of counselor skills. The generalized effects of nomothetic studies should be further examined in idiographic designs that define the specific variables and investigate antecedent and consequent events. Also, within subject designs can provide a functional analysis of specific training procedures and process outcome variables in therapeutic change. Systematic replication of idiographic research can verify training procedures and can refine counselor behavioral skills explored by nomothetic research.

A great deal of time and effort is required to implement the training procedures proposed in this paper. However, two considerations suggest that such an investment is worthwhile. First, a small number of well qualified counselors enhances the profession far more than a large number of ineffective ones. Furthermore, counselor education programs have an ethical responsibility to provide quality training to those trainees selected to complete the program and ultimately to enhance the welfare of the people (client) the counselor trainees will later serve.

Table 1

DISCRIMINATION MODEL FOR COUNSELOR TRAINING

I. SELF DEVELOPMENT	II. REPERTOIRE DEVELOPMENT	III.
(Is my head together?)	(What can I do?)	
A. Covert Behavior Overt Behavior (What's happening with me?)	A. Behavior Baseline (Where am I at?) Goal Setting (Where do I want to be?)	
B. Cue Modification Self Regulation (Can I control me?)	B. Response Repertoire Development for Discriminating Client and Counselor Behaviors (Getting there)	
C. Remediation	C. Counseling Strategies (Getting there) D. Environmental Intervention Techniques (Getting there)	

Table 1

DISCRIMINATION MODEL FOR COUNSELOR TRAINING

...MENT	II. REPERTOIRE DEVELOPMENT	III. PROCESS DEVELOPMENT
...together?)	(What can I do?)	(Is what I'm doing helping?
...ehavior	A. Behavior Baseline (Where am I at?)	A. Client Problem (Where the client is at
...navior ...happening with me?)	Goal Setting (Where do I want to be?)	and Goal Setting (Where the client wants to be)
...fication	B. Response Repertoire	B. Response Selection /
...ulation	Development for	Consequence
...ontrol me?)	Discriminating Client and Counselor Behaviors (Getting there)	(What am I doing to get the client there?)
...ion	C. Counseling Strategies (Getting there)	C. Counselor-Client Reciprocity
	D. Environmental Intervention Techniques (Getting there)	(I give to the client, the client gives to me.)

Table 2

TRAINING PROCEDURES FOR SELF DEVELOPMENT

GOAL	TRAINING PROCEDURES	CRITERION	MATERIAL	FIGURE
A. Identification Counselor Overt-Covert Behaviors	(1) Direct instruction	90% accuracy on follow-up questions	Written self test	
	(2) Video model: Labeling of behaviors	90% accuracy on behavior identification	Video model Tape rating chart	1
	(3) Focused attention experiences (meditation; relaxation; awareness; biofeedback)	Activity completion		
	(4) Videotape role-play interaction	Activity completion	Role-play video	1
	(5) Label covert-overt behaviors	90% accurate behavior identification	Rating chart	
	(6) Identify facilitating and interfering behaviors; Compare with role-play partner and process observer	90% agreement	Rating chart	2
B. Cue Modification & Self-Regulation	(1) Complete role-play video interactions	Activity completion	Role-play video	3
	(2) Self-observation: Record behaviors	90% accuracy	Chart	
	(3) Self-monitoring: Behavior baseline	Identification of frequency, duration of each behavior and S-R-C of each behavior	Chart Counter & Timer	4
	(4) Self-regulation strategies (a) Change stimulus condition (inhibit interfering) (b) Interrupt behavioral condition (inhibit interfering) (c) Make high prob. behavior contingent upon low prob. behavior (strengthen facilitating)	Successful completion of procedure		

Table 2 (continued)

GOAL	TRAINING PROCEDURES	CRITERION	MATERIAL	FIGURE
	(5) Complete role-play video interactions	Activity completion	Role-play video	4
	(6) Record facilitating and interfering behaviors	Identification of frequency, duration, of each behavior	Chart Counter & Timer	
	(7) Compare recording with baseline	(1) Facilitating behavior increase 75% (2) Interfering behavior decrease 75%		
C. Remediation Procedures	(1) If evaluation does not meet criterion, complete 1 or more remediation steps: Reactive inhibition Desensitization Covert sensitization Thought stopping Reinforcement techniques Bull baiting Negative practice Role reversal Behavior rehearsal Modeling	Activity completion		
	(2) Complete steps 1-7 again	(Self-Regulation)		

Table 3

TRAINING PROCEDURES FOR REPERTOIRE DEVELOPMENT

	GOAL	TRAINING PROCEDURES	CRITERION	MATERIAL	FIGURE
A.	Behavior Baseline & Goal Setting	(1) Videotape interactions with different coached clients	Activity completion	Coached client video	
		(2) Observe and record co. verbal and nonverbal behaviors: Check accuracy with observer	90% accurate identification of behavior	Rating chart	5
		(3) Obtain behavior baseline	Identification of frequency, duration of each behavior	Rating Chart Counter Timer	5
		(4) Compare baselines for each interaction (a) identify behaviors to strengthen (b) identify behaviors to weaken (c) identify behaviors to acquire	Identification of appropriate/inappropriate behaviors	Chart	6
		(5) Establish counselor behavioral goals (a) Select behaviors to strengthen/ add to repertoire (b) Set criterion level for successful completion of response class	Attainment of individual goal-criterion level	Progress Chart	6
B.	Response Repertoire Development Client Behavior	(1) Identify operational definitions: Differentiate client behaviors	90% accurate feedback definition	Written self test	
		(2) Complete programmed module (shaping)	90% accurate frame completion	Programmed module	
		(3) Observe videotaped client stimuli: label, record client behaviors	90% accuracy on labeling	Client video behavior description chart	7
	Counselor Behaviors	(1) Identify operational definitions: Differentiate counselor responses	90% accurate feedback definition	Written self test	
		(2) Complete programmed module (shaping)	90% accurate frame completion	Programmed module	

Table 3 (continued)

GOAL	TRAINING PROCEDURES	CRITERION	MATERIAL	FIGURE
	(3) Observe model of counselor response	Activity completion	Models	
	(4) Make response to client stimuli; Compare response to model	90% accurate agreement with modeled responses	Client simulation tape: model feedback	
	(5) Videotape role-play interaction using selected counselor response class	Activity completion	Role-play video	
	(6) Self or observer feedback; re-cycle Step 5 if necessary	80% accuracy in use of response class	Response checklist	8
	(7) Videotape interaction with coached client using selected co. response class	Activity completion	Coached client video	
	(8) Erase inappropriate responses; observe appropriate ones (self modeling)	Activity completion		
	(9) Teach response to someone else	Learner completes Steps 1-8		
C. Counseling Strategies	Steps 1-9 above, substituting "counseling strategy" for "co. response class."			9
D. Environmental Intervention Techniques	Steps 1-4 above, substituting "intervention technique" for "co. response class." Simulation and field experiences substituted for steps 5-9.			

Table 4

TRAINING PROCEDURES FOR PROCESS DEVELOPMENT

GOAL	TRAINING PROCEDURE	CRITERION	MATERIALS	FIGURE
A. Client Problem: Goal	(1) Complete programmed module (shaping)	90% accurate frame completion	Programmed module	
	(2) Observe model of co. in prob. identification-goal setting with different clients	Activity completion	Models	
	(3) Complete simulation tape of different clients: identify problem; set goal	Activity completion	Simulation tape	
	(4) Compare prob. identification/goal setting to model	90% accuracy of prob. identification and goal setting	Model feedback	
	(5) Videotape client interactions: observe video; observer feedback; re-cycle step 5 if necessary	Successful prob. identification/ goal setting in 75% interactions	Rating chart	10
B. Response Selection / Consequence	(1) Observe Co.-client model with client behavior, counselor response and consequence labeled	Activity completion	Model	
	(2) Observe Co.-client model: label and record client behavior, counselor response and consequence; compare answers to model	90% accurate labeling	Model Rating chart Model feedback	11 (Part I)
	(3) Observe Co.-client model of client behavior and co. response: identify predicted consequence-compare with actual consequence	75% accurate prediction	Model	
	(4) Videotape role-play interaction; for each client stimulus, select and make co. response, identify consequence	Activity completion	Role-play video	

Table 4 (continued)

GOAL	TRAINING PROCEDURE	CRITERION	MATERIAL	FIGURE
	(5) Compare response/ consequence identification w/observer or role-play partner; re-cycle step 4 if necessary	75% agreement		
	(6) Videotape client interaction; for each client stimulus select and make co. response, identify consequence	Activity completion	Client video	
	(7) Compare response/consequence identification w/observer; re-cycle step 6 if necessary	75% agreement		
Co.-Client Reciprocity	(1) Observe model of client behavior, co. response and consequence related to client goal	Activity completion	Model	
	(2) Complete simulation tape of client stimuli; select co. response, identify consequence: determine if reinforcing and goal-related; compare w/observer	75% agreement on reinforcing consequence identification	Simulation tape Rating chart	11 (Part II)
	(3) Videotape interactions with clients: Select co. responses; identify consequences	Activity completion	Client video	
	(4) Observe video; determine if consequence is reinforcing and goal-related. Compare with observer.	75% agreement on reinforcing consequence identification for each interaction.	Rating chart	11 (Part II)
D. Environmental Intervention	(1) Identify objectives.			
	(2) Apply appropriate strategy.			
	(3) Identify resulting consequences.			
	(4) Evaluate outcomes.			

Figure 1

BEHAVIOR OBSERVATION AND IDENTIFICATION

Instructions to Trainee: Part 1:
(1) Observe the "model videotape."
(2) Label and record all overt behavior of the model on
(3) Compare your labeling with the answers following the
(4) If you do not accurately identify 90% of behaviors u
complete steps 1-3 again.

Part 2:
(5) Observe the "model videotape" again.
(6) From your observation and identification of overt be
the covert behaviors of the model on this chart.
(7) Compare your labeling with the answers following the
(8) If you do not accurately identify 90% of behaviors u
complete this part again.
(9) When you have successfully completed this exercise,
Good job!

OVERT BEHAVIOR (Directly Observable)		COVERT BEHAVIO (Inference)		
VERBAL	NONVERBAL	THOUGHTS	FEELINGS (Affective)	PHYS (Int

Figure 1

BEHAVIOR OBSERVATION AND IDENTIFICATION

rainee: Part 1: (1) Observe the "model videotape."
(2) Label and record all overt behavior of the model on this chart.
(3) Compare your labeling with the answers following the tape.
(4) If you do not accurately identify 90% of behaviors under each overt category, complete steps 1-3 again.

Part 2: (5) Observe the "model videotape" again.
(6) From your observation and identification of overt behaviors, label and record the covert behaviors of the model on this chart.
(7) Compare your labeling with the answers following the tape.
(8) If you do not accurately identify 90% of behaviors under each covert category, complete this part again.
(9) When you have successfully completed this exercise, go on to the self videotape. Good job!

BEHAVIOR
Observable)

COVERT BEHAVIOR
(Inference)

	NONVERBAL	THOUGHTS	FEELINGS (Affective)	PHYSIOLOGICAL RESPONSES (Internal Body Cues)

Figure 2

RECOGNITION OF SELF CUE EFFECTS

Instructions to Trainee: (1) Label the covert-overt behavioral cues apparent in your video role-p
(2) Check your responses with role-play partner or observer. If there i
observe and re-label your tape.
(3) Check (✓) which covert-overt behaviors were facilitating (enabled c
himself, his problems, his goals) and which were interfering (appare
message or covert, overt behaviors where you attended to self rather
(4) Compare responses with role-play partner and process observer. If t
agreement, move on to the next stage.
(5) If agreement is less than 90%, all three should observe the videotap
on facilitating and interfering cues is obtained.

COVERT BEHAVIOR												OVERT BEHA
Thoughts			Feelings			Physiological Responses			Verbal			
(List)	Facil.	Inter.	(List)	Facil.	Inter.	(List)	Facil.	Inter.	(List)	Facil.	Inter.	(L

Figure 2

RECOGNITION OF SELF CUE EFFECTS

(1) Label the covert-overt behavioral cues apparent in your video role-play interaction.
(2) Check your responses with role-play partner or observer. If there is not 90% agreement, observe and re-label your tape.
(3) Check (✓) which covert-overt behaviors were facilitating (enabled client to talk about himself, his problems, his goals) and which were interfering (apparent incongruence in message or covert, overt behaviors where you attended to self rather than partner).
(4) Compare responses with role-play partner and process observer. If there is 90% or more agreement, move on to the next stage.
(5) If agreement is less than 90%, all three should observe the videotape until 90% agreement on facilitating and interfering cues is obtained.

EHAVIOR OVERT BEHAVIOR

Feelings			Physiological Responses			Verbal			Nonverbal		
(List)	Facil.	Inter.	(List)	Facil.	Inter.	(List)	Facil.	Inter.	(List)	Facil.	Inter.

Figure 3

COUNSELOR BEHAVIOR CHECKLIST

Instructions to Trainee: (1) For each videotaped interaction, list your verbal-nonverbal b
rating chart.
(2) Check accuracy of identification with observer; if less than
step 1 again.

V E R B A L	N O N V E R B A L

Figure 3

COUNSELOR BEHAVIOR CHECKLIST

ainee: (1) For each videotaped interaction, list your verbal-nonverbal behaviors on this rating chart.
(2) Check accuracy of identification with observer; if less than 90%, complete step 1 again.

V E R B A L	N O N V E R B A L

Figure 4

COUNSELOR RECORD SHEET

Date	Time (indicate a.m. or p.m.)	Antecedent Behavior	Observed Behavior	Consequent Behavior	Frequency of Observed Behavior	Duratio Observe

Figure 4

COUNSELOR RECORD SHEET

n.)	Antecedent Behavior	Observed Behavior	Consequent Behavior	Frequency of Observed Behavior	Duration of Observed Behavior

Figure 5

COUNSELOR BEHAVIOR CHECKLIST

Instructions to Trainee: (1) For each videotaped interaction, list your verbal-nonverbal behavior
(2) Check accuracy of identification with observer; if less than 90%, co
again.
(3) Record the frequency / duration for each behavior listed.
(4) Compare baselines for each interaction.

VERBAL	NONVERBAL	FREQUENCY	

Figure 5

COUNSELOR BEHAVIOR CHECKLIST

Trainee: (1) For each videotaped interaction, list your verbal-nonverbal behaviors on this chart.
(2) Check accuracy of identification with observer; if less than 90%, complete step 1 again.
(3) Record the frequency / duration for each behavior listed.
(4) Compare baselines for each interaction.

A L	N O N V E R B A L	F R E Q U E N C Y	D U R A T I O N

Figure 6

IDENTIFICATION OF COUNSELOR GOALS

Instructions to Trainee: (1) Based on baseline data, establish behavioral goals for yourself.
(2) List behaviors to be strengthened, weakened, acquired.
(3) Check those behaviors you wish to add / strengthen in your reper
(4) Set criterion level for successful completion of each response c

Behaviors to Strengthen		Behaviors to Weaken		Behavi
VERBAL		VERBAL		V
Behavior	Criterion	Behavior	Criterion	Behavior
NONVERBAL		NONVERBAL		NO
Behavior	Criterion	Behavior	Criterion	Behavior

Figure 6

IDENTIFICATION OF COUNSELOR GOALS

rainee: (1) Based on baseline data, establish behavioral goals for yourself.
(2) List behaviors to be strengthened, weakened, acquired.
(3) Check those behaviors you wish to add / strengthen in your repertoire.
(4) Set criterion level for successful completion of each response class.

to Strengthen	Behaviors to Weaken		Behaviors to Acquire	
E R B A L	V E R B A L		V E R B A L	
Criterion	Behavior	Criterion	Behavior	Criterion
V E R B A L	N O N V E R B A L		N O N V E R B A L	
Criterion	Behavior	Criterion	Behavior	Criterion

Figure 7

CLIENT BEHAVIOR DESCRIPTION

Instructions to Trainee: (1) Observe videotaped client stimuli.
(2) Label, record client behaviors on this chart.
(3) Compare your labeling with the answers following the tape.
(4) If you do not accurately record 90% of behaviors under each cate
steps 1-3 again.

VERBAL BEHAVIOR	NONVERBAL BEHAVI

Figure 7

CLIENT BEHAVIOR DESCRIPTION

Trainee: (1) Observe videotaped client stimuli.
(2) Label, record client behaviors on this chart.
(3) Compare your labeling with the answers following the tape.
(4) If you do not accurately record 90% of behaviors under each category, complete steps 1-3 again.

RBAL BEHAVIOR	NONVERBAL BEHAVIOR

Figure 8

VERBAL RESPONSE REPERTOIRE CHECKLIST

Instructions: (1) For each time each response is utilized in the interaction, make a tally
appropriate box.
(2) If the response does not meet operational definitions, do not tally it /o
under "other".

RESPONSE CATEGORY

	Information Giving	Silence	Interpretation	Command	Confrontation	Modeling	Ability Potential	Summarization	Reflection	Restatement	Minimal Verbal Stimulus	
Interaction 1												
Interaction 2												
Interaction 3												
Interaction 4												
Interaction 5												
Interaction 6												
Interaction 7												
Interaction 8												
Interaction 9												

Figure 8

VERBAL RESPONSE REPERTOIRE CHECKLIST

For <u>each</u> time <u>each</u> response is utilized in the interaction, make a tally mark in the appropriate box.
If the response does not meet operational definitions, do not tally it /or else tally under "other".

RESPONSE CATEGORY

Information Giving	Silence	Interpretation	Command	Confrontation	Modeling	Ability Potential	Summarization	Reflection	Restatement	Minimal Verbal Stimulus	Probe	Other

Figure 9

COUNSELING STRATEGIES CHECKLIST

Instructions: (1) Check (✓) the counseling strategies utilized by the counselor.
(2) For each client interaction, rate the accuracy of the strategy according to and criteria listed in the programmed module. If the counselor does not me give a 0; half = 50%; all = 100%.

MODELING					THOUGHT STOPPING					BEHAVIOR		
Accuracy					Accuracy					Accura		
Inaccurate		Somewhat		Totally	Inaccurate		Somewhat		Totally	Inaccurate		Somewh
0	25	50	75	100	0	25	50	75	100	0	25	50

CONTRACTING					SELF MONITORING					ASSERTIVE		
Accuracy					Accuracy					Accur		
Inaccurate		Somewhat		Totally	Inaccurate		Somewhat		Totally	Inaccurate		Somew
0	25	50	75	100	0	25	50	75	100	0	25	50

Figure 9

COUNSELING STRATEGIES CHECKLIST

Check (✓) the counseling strategies utilized by the counselor.
For each client interaction, rate the accuracy of the strategy according to the definitions and criteria listed in the programmed module. If the counselor does not meet any of the criteria give a 0; half = 50%; all = 100%.

NG acy hat Totally 75 100	THOUGHT STOPPING Accuracy Inaccurate Somewhat Totally 0 25 50 75 100	BEHAVIOR REHEARSAL Accuracy Inaccurate Somewhat Totally 0 25 50 75 100

CTING acy hat Totally 75 100	SELF MONITORING Accuracy Inaccurate Somewhat Totally 0 25 50 75 100	ASSERTIVE TRAINING Accuracy Inaccurate Somewhat Totally 0 25 50 75 100

Figure 10

CLIENT PROBLEM/GOAL IDENTIFICATION

YES	NO	
___	___	Correctly identified client's problem.
___	___	Correctly identified client's feeling(s) about the problem.
___	___	Correctly identified what the client expects from counseling (goal identification).
___	___	Successfully communicated his perception of the client's problem to the client (client confirmation).
___	___	Successfully communicated his perception of the client's feelings about the problem to the client (client confirmation).
___	___	Successfully communicated his perception of the client's expectations from counseling to the client (client confirmation).

Figure 11

RESPONSE SELECTION-CONSEQUENCE IDENTIFICATION

Instructions to Trainee: Part I. (Response Selection-Consequence)
(1) Observe video model; list client behavior, counselor response a
(2) Compare your labeling to model answers; if less than 90% accura for any category, complete step 1 again.

Part II. (Co.-Client Reciprocity)
(1) Label client behavior, co. response and consequence for simulat video interaction.
(2) Determine if each consequence is reinforcing and client goal-re
(3) Compare answers with observer rating; if less than 75% agreemen 1-2 again.

CLIENT BEHAVIOR	CO. RESPONSE	CONSEQUENCE	C REINFORCING	
			YES	NO

Figure 11

RESPONSE SELECTION-CONSEQUENCE IDENTIFICATION

Trainee: Part I. (Response Selection-Consequence)
(1) Observe video model; list client behavior, counselor response and consequence.
(2) Compare your labeling to model answers; if less than 90% accurate identification for any category, complete step 1 again.

Part II. (Co.-Client Reciprocity)
(1) Label client behavior, co. response and consequence for simulation tape and/or video interaction.
(2) Determine if each consequence is reinforcing and client goal-related.
(3) Compare answers with observer rating; if less than 75% agreement, complete steps 1-2 again.

VIOR	CO. RESPONSE	CONSEQUENCE	C REINFORCING		C GOAL-RELATED	
			YES	NO	YES	NO

REFERENCES

Ayllon, T. and Azrin, N. H. The token economy: A motivational system for therapy and rehabilitation. New York: Appleton-Century-Crofts, 1968.

Bandura, A. Principles of behavior modification. New York: Holt, Rinehart, and Winston, 1969.

Benjamin, A. The helping interview. New York: Houghton Mifflin, 1969.

Born, D. G. and Herbert, E. W. A further study of Keller's personalized system of instruction. Journal of Experimental Education, 1971, 40, 6-11.

Born, D. G., Gledhill, S. M., and Davis, M. L. Examination performance in lecture-discussion and personalized instruction courses. Journal of Applied Behavior Analysis, 1972, 5, 33-43.

Brammer, L. M. and Shostrum, E. L. Therapeutic psychology: Fundamentals of counseling and psychotherapy. Englewood-Cliffs, New Jersey: Prentice-Hall, 1960.

Carkhuff, R. R. The development of human resources. New York: Holt, Rinehart, and Winston, Inc., 1971.

Carkhuff, R. R. Credo of a militant humanist. The Personnel and Guidance Journal, 1972, 51, 237-242.

Cautela, J. R. Covert sensitization. Psychological Record, 1967, 20, 459-468.

Cautela, J. R. Covert reinforcement. Behavior Therapy, 1970, I, 33-50.

Cautela, J. R. Behavior therapy and self-control: Techniques and implications. In C. M. Franks (Ed.) Behavior therapy: Appraisal and status. New York: McGraw-Hill, 1969.

Cormier, W. H. and Huck, S. W. Designs for applied behavior analysis. Unpublished manuscript, The University of Tennessee, Knoxville, 1972.

Cormier, W. H., George, T. and Wilson, H. Individualization of learning: A systems approach. Unpublished manuscript, The University of Tennessee, Knoxville, 1972.

Delaney, D. and Eisenberg, S. The counseling process. New York: Rand McNally, 1972.

DiMattia, D. M. and Zimmer, J. M. Comparison of training services for teaching emotional discrimination. Counselor Education and Supervision, 1972, 12, 17-23.

Eisenberg, S. and Delaney, D. Using video simulation of counseling for training counselors. Journal of Counseling Psychology, 1970, 17, 15-19.

Ferster, C. B., Nurnberger, J. I., and Levitt, E. B. The control of eating. Journal of Mathetics, 1962, 1, 87-110.

Ferster, C. B. Individualized instruction in a large introductory psychology course. Psychological Record, 1968, 18, 521-532.

Franks, C. M. (Ed.) Behavior therapy: Appraisal and status. New York: McGraw-Hill, 1969.

Goldiamond, I. Self-control procedures in personal behavior problems. Psychological Reports, 1965, 17, 851-868.

Hackney, H. L. and Nye, L. S. Counseling strategies and objectives. Englewood-Cliffs, New Jersey: Prentice-Hall, 1973 (in press).

Hannum, J. W. The modification of evaluative self thoughts and their effect on overt behavior. Unpublished Ph.D. Thesis, Stanford University, 1972.

Homme, L. E. Perspectives in psychology - XXIV: Control of coverants, the operants of the mind. Psychological Record, 1965, 15, 501-511.

Hosford, R. E. and Zimmer, J. M. Humanism and behaviorism. Counseling and Values, February, 1972.

Ivey, A. E. Micro-counseling: Innovations in interviewing training. Springfield, Illinois: Charles C. Thomas, 1971.

Johnston, J. M. and Pennybacker, H. S. A behavioral approach to college teaching. American Psychologist, 1971, 26, 219-244.

Kanfer, F. H. Self regulation: Research, issues, and speculations. In C. Neuringer and J. L. Michael (Eds.) Behavior modification in clinical psychology. New York: Appleton-Century-Crofts, 1970.

Kanfer, F. H. and Duerfeldt, P. H. A comparison of self-reward and self-criticism as a function of types of prior external reinforcement. Journal of Personality and Social Psychology, 1968, 8, 261-268.

Kanfer, F. A. and Phillips. J. S. Learning foundations of behavior therapy. New York: Wiley and Sons, 1970.

Keller, F. S. "Goodbye, Teacher..." Journal of Applied Behavior Analysis, 1968, 1, 79-89.

Krasner, L. The therapist as a social reinforcement machine. In Research in psychotherapy. II, Washington, D. C.: American Psychological Association, 1962.

Krumboltz, J. D. and Thoresen, C. E. (Eds.) Behavioral counseling: Cases and techniques. New York: Holt, Rinehart, & Winston, 1969.

Lang, P. J. The mechanics of desensitization and the laboratory study of human fear. In C. M. Franks (Ed.) Behavior therapy: Appraisal and status. New York: McGraw-Hill, 1969.

Lazarus, A. A. Behavior therapy and beyond. New York: McGraw-Hill, 1971.

Lloyd, R. E. and Knutzen, N. J. A self-paced programmed undergraduate course in the experimental analysis of behavior. Journal of Applied Behavior Analysis, 1969, 2, 125-133.

Mahoney, M. J. The self-management of covert behavior: A case study. Behavior Therapy, 1972 (in press).

Malleson, N. Panic & phobia. A possible method of treatment. Lancet, 1959, I, 225-227.

Marston, S. R. Self reinforcement: The relevance of a concept in analogue research to psychotherapy. Psychotherapy Research and Practice, 1965, 2, 1-5.

McMichael, J. S. and Corey, J. R. Contingency management in an introductory psychology course produces better learning. Journal of Applied Behavior Analysis, 1969, 2, 79-83.

Myers, W. A. Operant learning principles applied to teaching introductory statistics. Journal of Applied Behavior Analysis, 1970, 3, 213-220.

Patterson, C. H. Theories of counseling and psychotherapy. New York: Harper and Row, 1966.

Paul, G. R. Outcome of systematic desensitization, I & II. In C. M. Franks (Ed.) Behavior therapy: Appraisal and status. New York: McGraw-Hill, 1969.

Piaget, J. W. Training patients to communicate. In A. A. Lazarus (Ed.) Clinical Behavior Therapy. New York: Brunner/Mazel, 1972.

Secord, P. F., and Backman, C. W. Social psychology, New York: McGraw-Hill, 1964.

Sheppard, W. C. and MacDermot, A. G. Design and evaluation of a programmed course in introductory psychology. Journal of Applied Behavior Analysis, 1970, 3, 5-11.

Skinner, B. F. Science and human behavior. New York: MacMillan, 1953.

Thoresen, C. E. and Mahoney, M. J. Behavioral self control. New York: Holt, Rinehart, and Winston, in press.

Ullmann, L. P. and Krasner, L. (Eds.) Case studies in behavior modification. New York: Holt, Rinehart, and Winston, 1965.

Wolpe, J. The practice of behavior therapy. New York: Pergamon Press, 1969.

Wolpe, J., and Lazarus, A. Behavior therapy techniques. New York: Pergamon Press, 1966.

FOOTNOTES

1 Request for reprints should be sent to William H. Cormier, 108 Claxton Education Building, The University of Tennessee, Knoxville, Tennessee 37916.

FOOTNOTES

2 The authors are indebted to Mariana Davis and John Edgerly, two esteemed friends and colleagues, for their critical review and helpful suggestions.

3 Facilitating and interfering are used in this section in the generic sense since the effects of these behaviors can only be determined in terms of the actual consequences produced with clients.

4 This figure is an illustration of some frequently used counselor response categories but does not represent or include all possible behaviors that might exists in a counselor's repertoire. Similar rating charts should be developed.